

Form VA For a Work of the Visual Arts UNITED STATES COPYRIGHT OFFICE

REGISTRATION NUMBER

VA VAU EFFECTIVE DATE OF REGISTRATION Month Day Year

DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET.

Title of This Work

NATURE OF THIS WORK See instructions

SexGen Platinum + Diamond Base v5.01

Computer Graphic/Animation

Previous or Alternative Titles

Publication as a Contribution If this work was published as a contribution to a periodical, serial, or collection, give information about the collective work in which the contribution appeared. Title of Collective Work

If published in a periodical or serial give: Volume Number Issue Date On Pages

NAME OF AUTHOR

DATES OF BIRTH AND DEATH Year Born Year Died

Eros, LLC

Was this contribution to the work a "work made for hire"? Yes No

Author's Nationality or Domicile Name of Country Citizen of United States Domiciled in Lutz, Florida

Was This Author's Contribution to the Work Anonymous? Pseudonymous? Yes No Yes No

Under the law, the "author" of a "work made for hire" is generally the employer, not the employee (see instructions) For any part of this work that was "made for hire" check "Yes" in the space provided, give the employer (or other person for whom the work was prepared) as "Author" of that part, and leave the space for dates of birth and death blank

Nature of Authorship Check appropriate box(es). See instructions 3-Dimensional sculpture 2-Dimensional artwork Reproduction of work of art Map Photograph Jewelry design Technical drawing Text Architectural work

Name of Author

Dates of Birth and Death Year Born Year Died

Was this contribution to the work a "work made for hire"? Yes No

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Nature of Authorship Check appropriate box(es). See instructions 3-Dimensional sculpture 2-Dimensional artwork Reproduction of work of art Map Photograph Jewelry design Technical drawing Text Architectural work

Year in Which Creation of This Work Was Completed 2004 This information must be given in all cases. Date and Nation of First Publication of This Particular Work Complete this information ONLY if this work has been published. Month March Day 28 Year 2005 United States Nation

COPYRIGHT CLAIMANT(S) Name and address must be given even if the claimant is the same as the author given in space 2.

Eros, LLC 16207 September Drive, Lutz, Florida 33549

Transfer If the claimant(s) named here in space 4 is (are) different from the author(s) named in space 2, give a brief statement of how the claimant(s) obtained ownership of the copyright.

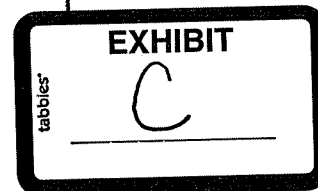
APPLICATION RECEIVED

ONE DEPOSIT RECEIVED

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FUNDS RECEIVED

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MORE ON BACK Complete all applicable spaces (numbers 5-8) on the reverse side of this page. See detailed instructions. Sign the form at line 6.

DO NOT WRITE HERE Page 1 of pages

EXAMINED BY _____

FORM VA

CHECKED BY _____

CORRESPONDENCE
 Yes

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DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET.

PREVIOUS REGISTRATION Has registration for this work, or for an earlier version of this work, already been made in the Copyright Office?

- Yes No If your answer is "Yes," why is another registration being sought? (Check appropriate box.) ▼
 - a. This is the first published edition of a work previously registered in unpublished form.
 - b. This is the first application submitted by this author as copyright claimant.
 - c. This is a changed version of the work, as shown by space 6 on this application.
- If your answer is "Yes," give: Previous Registration Number ▼ Year of Registration ▼

DERIVATIVE WORK OR COMPILATION Complete both space 6a and 6b for a derivative work; complete only 6b for a compilation.

a. Preexisting Material Identify any preexisting work or works that this work is based on or incorporates. ▼

See instructions
before completing
this space.

b. Material Added to This Work Give a brief, general statement of the material that has been added to this work and in which copyright is claimed. ▼

DEPOSIT ACCOUNT If the registration fee is to be charged to a Deposit Account established in the Copyright Office, give name and number of Account.

CORRESPONDENCE Give name and address to which correspondence about this application should be sent. Name/Address/Apt/City/State/Zip ▼

Eros, LLC
16207 September Drive, Lutz, Florida 33549

Area code and daytime telephone number (813) 842-0761
Email stroker.serpentine@gmail.com

Fax number (813) 930-9206

CERTIFICATION I, the undersigned, hereby certify that I am the

- check only one ▶
- author
 - other copyright claimant
 - owner of exclusive right(s)
 - authorized agent of Eros, LLC
- Name of author or other copyright claimant, or owner of exclusive right(s) ▲


of the work identified in this application and that the statements made by me in this application are correct to the best of my knowledge.

Typed or printed name and date ▼ If this application gives a date of publication in space 3, do not sign and submit it before that date.

Kevin Alderman, CEO, Eros, LLC

Date 06/22/07

Handwritten signature (X) ▼

X 

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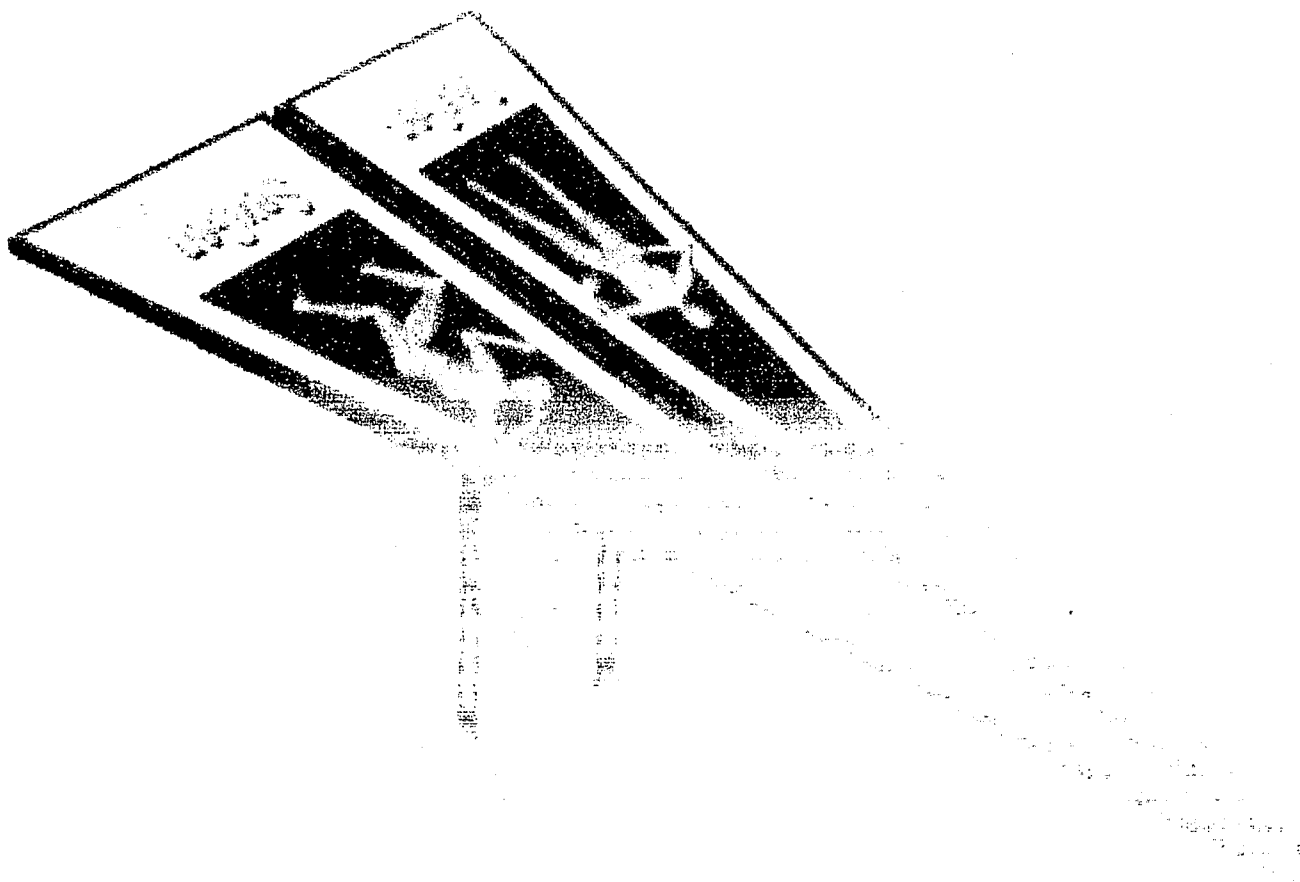
Name ▼
Eros, LLC
16207 September Drive
Lutz, Florida 33549

YOU MUST:

- Complete all necessary spaces
- Sign your application in space 8

SEND ALSO ELEMENTS

- Application form
- Three copies of the work to be registered
- Payment to Copyright Clearance Center
- Self-addressed envelope
- Copyright Office
- Copyright Office
- Copyright Office



1012
69-216/691

DATE 6-22-07

1012
69-216/691

ACH RT 081000104

SUNTRUST

FOR Sevgen S.01

10120121100101215210000565060731

REGISTER OF COPYRIGHTS

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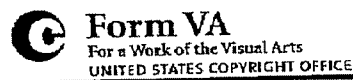
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PS Form 3800, August 2006



REGISTRATION NUMBER

VA VAU
EFFECTIVE DATE OF REGISTRATION

Month Day Year

DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET.

Title of This Work ▼ **NATURE OF THIS WORK ▼** See instructions

SexGen Platinum Base v.4.01 Computer Graphic/Animation

Previous or Alternative Titles ▼

Publication as a Contribution If this work was published as a contribution to a periodical, serial, or collection, give information about the collective work in which the contribution appeared. Title of Collective Work ▼

If published in a periodical or serial give: Volume ▼ Number ▼ Issue Date ▼ On Pages ▼

NAME OF AUTHOR ▼ DATES OF BIRTH AND DEATH

Eros, LLC Year Born ▼ Year Died ▼

Was this contribution to the work a "work made for hire"? Yes No

Author's Nationality or Domicile Name of Country OR Citizen of United States Domiciled in Lutz, Florida

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3-Dimensional sculpture Map Technical drawing

2-Dimensional artwork Photograph Text

Reproduction of work of art Jewelry design Architectural work

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Eros, LLC
16207 September Drive, Lutz, Florida 33549

Transfer If the claimant(s) named here in space 4 is (are) different from the author(s) named in space 2, give a brief statement of how the claimant(s) obtained ownership of the copyright. ▼

APPLICATION RECEIVED

ONE DEPOSIT RECEIVED

TWO DEPOSITS RECEIVED

FUNDS RECEIVED

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MORE ON BACK ► • Complete all applicable spaces (numbers 5-9) on the reverse side of this page • See detailed instructions. • Sign the form at line 8. DO NOT WRITE HERE Page 1 of _____ pages

See instructions before completing this space

EXAMINED BY

FORM VA

CHECKED BY

CORRESPONDENCE

Yes

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COPYRIGHT
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USE
ONLY

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PREVIOUS REGISTRATION Has registration for this work, or for an earlier version of this work, already been made in the Copyright Office?

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- b. This is the first application submitted by this author as copyright claimant.
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See instructions
before completing
this space

b. **Material Added to This Work** Give a brief, general statement of the material that has been added to this work and in which copyright is claimed. ▼

DEPOSIT ACCOUNT If the registration fee is to be charged to a Deposit Account established in the Copyright Office, give name and number of Account.
Name ▼ Account Number ▼

CORRESPONDENCE Give name and address to which correspondence about this application should be sent. Name/Address/Apt/City/State/Zip ▼

Eros, LLC
16207 September Drive, Lutz, Florida 33549

Area code and daytime telephone number (813) 842-0761

Fax number (813) 930-9206

Email stroker.serpentine@gmail.com

CERTIFICATION* I, the undersigned, hereby certify that I am the

check only one ▶

- author
- other copyright claimant
- owner of exclusive right(s)
- authorized agent of Eros, LLC

Name of author or other copyright claimant, or owner of exclusive right(s) ▲

of the work identified in this application and that the statements made by me in this application are correct to the best of my knowledge.

Typed or printed name and date ▼ If this application gives a date of publication in space 3, do not sign and submit it before that date.

Kevin Alderman, CEO, Eros, LLC

Date 06/22/07

Handwritten signature (X) ▼

X

Certificate will be mailed in window envelope to this address:

Name ▼	Eros, LLC
Number/Street/Apt ▼	16207 September Drive
City/State/ZIP ▼	Lutz, Florida 33549

YOU MUST:

- Complete all necessary spaces
- Sign your application in space 8

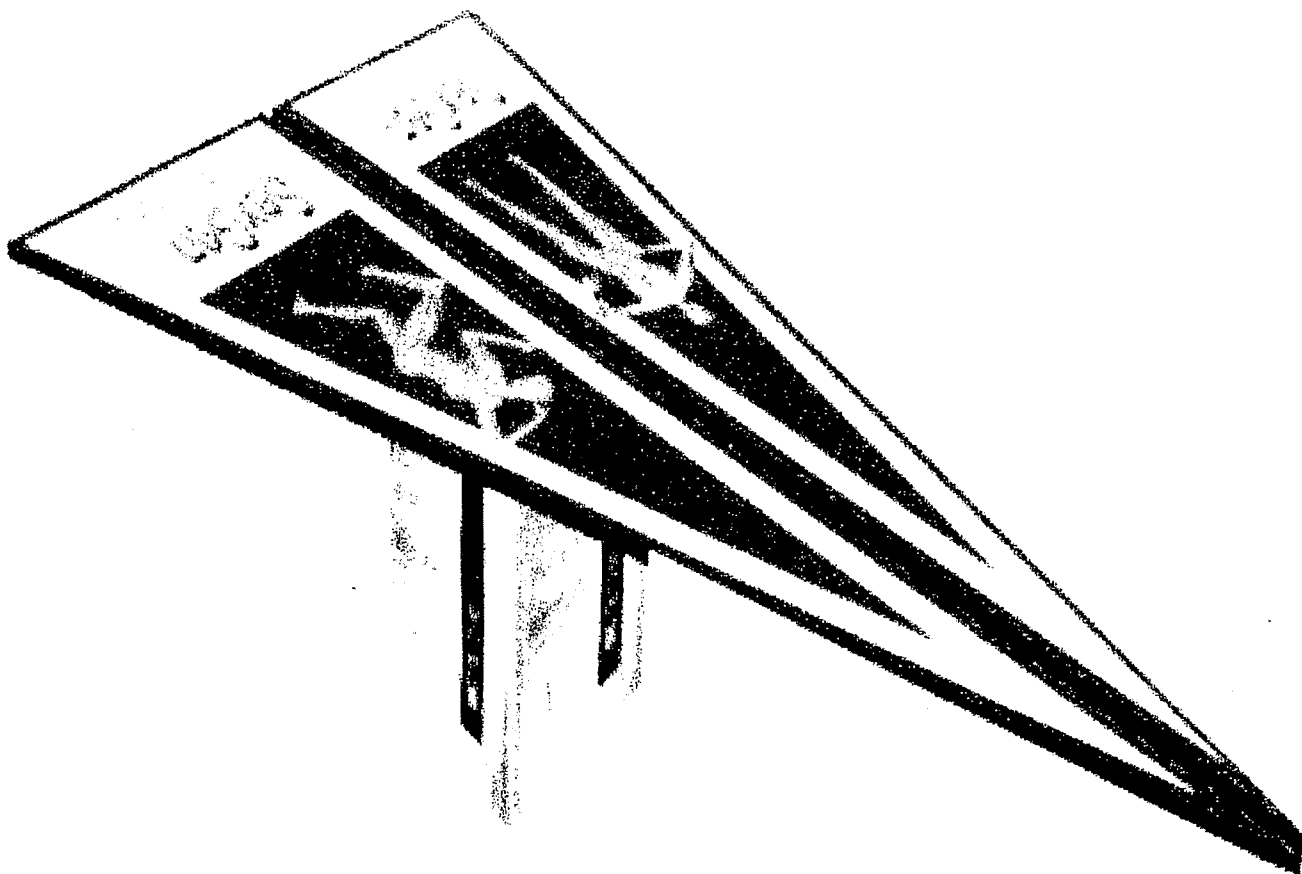
SEND ALL 3 ELEMENTS IN THE SAME PACKAGE:

1. Application form
2. Nonrefundable filing fee in check or money order payable to Register of Copyrights
3. Deposit material

MAIL TO:

Library of Congress
Copyright Office
101 Independence Avenue SE
Washington, DC 20559-6000

*17 USC §505(e): Any person who knowingly makes a false representation of a material fact in the application for copyright registration provided for by section 409, or in any written statement filed in connection with the application, shall be fined not more than \$2,500.





REGISTRATION NUMBER

TX	TXU	PA	PAU	VA	VAU	SR	SRU	RE
----	-----	----	-----	----	-----	----	-----	----

EFFECTIVE DATE OF SUPPLEMENTARY REGISTRATION

Month Day Year

DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET.

Title of Work **SexGen Platinum Base v4.01**

Registration Number of the Basic Registration (As yet unassigned)	Year of Basic Registration 2007
Name(s) of Author(s) Eros, LLC	Name(s) of Copyright Claimant(s) Eros, LLC

Location and Nature of Incorrect Information in Basic Registration **▼**

Line Number **#2A** Line Heading or Description **Name of Author**

Incorrect Information as It Appears in Basic Registration **▼**

Eros, LLC

Corrected Information **▼**

Mr. Kevin Alderman resident of Lutz, Florida (also) Mr. Hans Croes resident of Amsterdam, Netherlands

Explanation of Correction **▼**

Mr(s) Alderman and Croes subsequently assign their copyrights in the work to Eros LLC

Location and Nature of Information in Basic Registration to be Amplified **▼**

Line Number **#4** Line Heading or Description **Transfer**

Amplified Information and Explanation of Information **▼**

Eros LLC is the owner of the copyrights by way of assignment from Mr. Alderman and Mr. Croes

MORE ON BACK **▶** • Complete all applicable spaces (D-G) on the reverse side of this page.
 • See detailed instructions. • Sign the form at Space F.

DO NOT WRITE HERE
 Page 1 of _____ pages

FORM CA: RECEIVED	FORM CA
FUNDS RECEIVED DATE	
EXAMINED BY	
CORRESPONDENCE <input type="checkbox"/>	
REFERENCE TO THIS REGISTRATION ADDED TO BASIC REGISTRATION <input type="checkbox"/> YES <input type="checkbox"/> NO	

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Continuation of: Part B or Part C

Correspondence: Give name and address to which correspondence about this application should be sent.

Kevin Alderman
16207 September Dr.
Lutz, FL. 33549

Phone (813) 909-2071 Fax () Email stroker.serpentine@gmail.com

Deposit Account: If the registration fee is to be charged to a Deposit Account established in the Copyright Office, give name and number of Account.

Name _____
Account Number _____

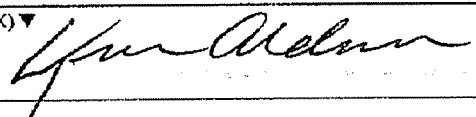
Certification* I, the undersigned, hereby certify that I am the: (Check only one)

- author
- owner of exclusive right(s)
- other copyright claimant
- duly authorized agent of Eros, LLC

Name of author or other copyright claimant, or owner of exclusive right(s) ▲

of the work identified in this application and that the statements made by me in this application are correct to the best of my knowledge.

Typed or printed name ▼ Kevin Alderman, CEO, Eros, LLC Date ▼ 7/2/07

Handwritten signature (X) ▼ 

Certificate will be mailed in window envelope to this address:

Name ▼
Number/Street/Apt ▼
City/State/ZIP ▼

YOU MUST:

- Complete all necessary spaces
- Sign your application in Space F

SEND ALL ELEMENTS IN THE SAME PACKAGE:

1. Application form
2. Nonrefundable filing fee in check or money order payable to Registrar of Copyrights

MAIL TO:

Library of Congress
Copyright Office
101 Independence Avenue SE
Washington, DC 20559-6000

*17 USC §506(e): Any person who knowingly makes a false representation of a material fact in the application for copyright registration provided for by section 409, or in any written statement filed in connection with the application, shall be fined not more than \$2,500.

EROS LLC 05/07
16207 September Dr
Lutz, FL 33549

1151
68-215/681

DATE 7-2-07

PAY TO THE ORDER OF

Register of Corporations

\$ 115.00

One hundred fifteen & no/100

DOLLARS



SUNTRUST

ACH RT 081000104

SOX GEN 4.01

copyright amendment #1

Kevin Alderman

FOR

⑈001151⑈ ⑆08102152⑆ ⑆000001⑆ ⑆251201E90⑆ ⑆151100⑈

MP

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REGISTRATION NUMBER

TX	TXU	PA	PAU	VA	VAU	SR	SRU	RE
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EFFECTIVE DATE OF SUPPLEMENTARY REGISTRATION

Month Day Year

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Title of Work ▼
SexGen Platinum+Diamond Base v5.01

Registration Number of the Basic Registration ▼ (As yet unassigned)	Year of Basic Registration ▼ 2007
Name(s) of Author(s) ▼ Eros, LLC	Name(s) of Copyright Claimant(s) ▼ Eros, LLC

Location and Nature of Incorrect Information in Basic Registration ▼
Line Number #2A Line Heading or Description Name of Author

Incorrect Information as It Appears in Basic Registration ▼
Eros, LLC

Corrected Information ▼
Mr. Kevin Alderman resident of Lutz, Florida (also) Mr. Hans Croes resident of Amsterdam, Netherlands

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Line Number #4 Line Heading or Description Transfer

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FORM CA RECEIVED

FORM CA

FUNDS RECEIVED DATE

EXAMINED BY

CORRESPONDENCE

REFERENCE TO THIS REGISTRATION ADDED TO BASIC REGISTRATION YES NO

FOR COPYRIGHT OFFICE USE ONLY

DO NOT WRITE ABOVE THIS LINE. IF YOU NEED MORE SPACE, USE A SEPARATE CONTINUATION SHEET.

Continuation of: Part B or Part C

Correspondence: Give name and address to which correspondence about this application should be sent.

Kevin Alderman
16207 September Dr.
Lutz, FL. 33549

Phone (813) 909-2071 Fax () Email stroker.serpentine@gmail.com

Deposit Account: If the registration fee is to be charged to a Deposit Account established in the Copyright Office, give name and number of Account.
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Account Number _____

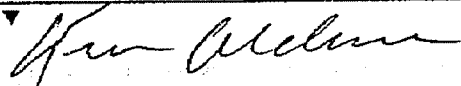
Certification* I, the undersigned, hereby certify that I am the: (Check only one)

- author
- owner of exclusive right(s)
- other copyright claimant
- duly authorized agent of Eros, LLC

Name of author or other copyright claimant, or owner of exclusive right(s) ▲
of the work identified in this application and that the statements made by me in this application are correct to the best of my knowledge.

Typed or printed name ▼ Kevin Alderman, CEO, Eros, LLC

Date ▼ 7/02/07

Handwritten signature (X) ▼ 

Certificate will be mailed in window envelope to this address:

Name ▼
Number/Street/Apt ▼
City/State/ZIP ▼

YOU MUST:

- Complete all necessary spaces
- Sign your application in Space F

SEND ALL ELEMENTS IN THE SAME PACKAGE:

1. Application form
2. Nonrefundable filing fee in check or money order payable to Register of Copyrights

MAIL TO:
Library of Congress
Copyright Office
101 Independence Avenue SE
Washington, DC 20559-6000

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1152
63-215/631

EROS LLC 05/07
16207 September Dr
Lutz, FL 33549

DATE 7-2-07

PAY TO THE ORDER OF Register of Corporations \$ 115.00
One hundred fifteen & no/100 DOLLARS



SIXTY 5.01



SUNTRUST ACH RT 061000104

Kevin Alderman

FOR Copyright violation #2

⑈001152⑈ ⑆063102152⑆1000056506073⑈

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